

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018)		TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel/please use Form CJA24</i> Please read instructions on next page.		COURT USE ONLY DUUE DATE:											
1a. CONTACT PERSON FOR THIS ORDER Olivia Carville	2a. CONTACT PHONE NUMBER (929) 310-5620	3. CONTACT EMAIL ADDRESS ocarville1@bloomberg.net													
1b. ATTORNEY NAME (if different)	2b. ATTORNEY PHONE NUMBER	3. ATTORNEY EMAIL ADDRESS													
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)	5. CASE NAME IN RE: SOCIAL MEDIA ADOLESCENT ADDICTION/	6. CASE NUMBER 4:22 03047													
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR Raynee Mercado	8. THIS TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL	<input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) CJA: Do not use this form; use Form CJA24.													
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:															
a. HEARING(S) (OR PORTIONS OF HEARINGS)	b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed)			c. DELIVERY TYPE (Choose one per line)											
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	EOF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
02/12/2025	YGR		full hearing	●	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:															
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).															
11. SIGNATURE Olivia Carville						12. DATE 02/20/2025									
Save as new PDF															
Clear Form															